Under the Paperwork Reduction Act of 1995. TRANSMITTAL FORM (to be used for all correspondence after initial to the second sec	Application Number Filing Date First Named Inventage Art Unit Examiner Name	November 9, 2005 Chung et al. 2821 Tuyet Thi Vo		
Total Number of Pages in This Submission	, morney Bookerre	YPL-PT023		
ENCLOSURES (Check all that apply)				
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Drawing(s) Licensing-related Pal Petition Petition to Convert to Provisional Application Power of Attorney, R Change of Correspon Terminal Disclaimer Request for Refund CD, Number of CD(s Landscape Tab	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Form PTOL-85		
	TURE OF APPLICANT,	ATTORNEY, OR AGENT		
Signature Printed name Robert J. Ballarini Date	G, P.C.	Reg. No. 48,684		
I hereby certify that this correspondence is being face	ERTIFICATE OF TRANS simile transmitted to the USPTO or ue Fee, Commissioner for Patents	SMISSION/MAILING deposited with the United States Postal Service with sufficient postage as first, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:		
Signature Typed or printed name Robert J. Balla	Selle :	Date 2/16/07		

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1,012.00

TOTAL AMOUNT OF PAYMENT

Approved for use through 07/31/2006.

November 9, 2005

10/556,226

YPL-PT023

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Filing Date

Application Number

Attorney Docket No.

Under the Par Complete if Known t to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE	TRANSMITTAL
	For FY 2006

First Named Inventor Chung et al. **Examiner Name** Tuyet Thi Vo X Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2821

1,012.00

METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 22-0493 Deposit Account Name: Volpe and Koenig, P.C. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING; Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** EXAMINATION FEES **Small Entity Small Entity Small Entity Application Type** Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 200 250 100 Design 200 100 100 130 50 65 200 Plant 100 300 160 150 80 Reissue 300 150 500 600 250 300 200 Provisional 100 0 n 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee Description <u>Fee (\$)</u> Each claim over 20 (including Reissues) 50 25 200 Each independent claim over 3 (including Reissues) 100 Multiple dependent claims 360 180 **Total Claims Multiple Dependent Claims Extra Claims** Fee (\$) Fee Paid (\$) Fee (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims **Extra Claims** Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Total Sheets Extra Sheets Fee Paid (\$) (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount)

SUBMITTED BY		
Signature Wort Calla:	Registration No. (Attorney/Agent) 48,684	Telephone 215-568-6400
Name (Print/Type) Robert J. Ballarini		Date 2/16/07

Other (e.g., late filing surcharge): Issue Fee, Publication Fee And Four (4) Advance Copies

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PART B - FEE(S) TRANSMITTAL

Complete and so this arm, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

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INSTRUCTIONS: We form should be sed for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence solutions the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless correct properties of the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 3624 7590 12/07/2006 Certificate of Mailing or Transmission VOLPE AND KOENIG, P.C. I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. UNITED PLAZA, SUITE 1600 30 SOUTH 17TH STREET PHILADELPHIA, PA 19103 22/2007 FMETEKI2 00000007 10556226 (Depositor's name Ballarini (Signature) 700.00 OP 300.00 DP (Date) 02 FC:1504 Δ٨ EC • 8001 FILING DATE FIRST NAMED INVENTOR CONFIRMATION NO. APPLICATION NO. ATTORNEY DOCKET NO. 10/556,226 11/09/2005 Kyu-Sun Chung YPL-PT023 TITLE OF INVENTION: APPARATUS FOR INJECTING PLASMA GAS IN ATMOSPHERE APPLN, TYPE SMALL ENTITY **ISSUE FEE DUE** PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE YES \$700 \$300 \$1000 03/07/2007 nonprovisional **CLASS-SUBCLASS EXAMINER** ART UNIT 2821 250-39600R VO, TUYET THI Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Nolpe And Koenig, P.C (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Seoul, Republic of Korea Industry-University Cooperation Foundation Hanyang University Please check the appropriate assignee category or categories (will not be printed on the patent): 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) 4a. The following fee(s) are submitted: Issue Fee A check is enclosed. ■ Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any Advance Order - # of Copies overpayment, to Deposit Account Number (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature Robert J. Ballarini 48,684 Registration No. Typed or printed name _

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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